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National Stage Processing
(703) 305-3631

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)				SERIAL NO. 09/582003	FILING DATE	
				APPLICANT(S)		
CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/	/				
2	/	/				
3	2	/				
4	1	①				
5	2	/				
6	2	/				
7	1	/				
8	①	/				
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TOTAL IND.	1		1			
TOTAL DEP.	10	←	13	←	←	
TOTAL CLAIMS	11	←	14	←	←	